PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

appropriate. All further cor	respondence including the location or directed otherwise	Patent advance or	ders and notifi	cation of maintenance fees	will be mailed to the current s; and/or (b) indicating a sep	correspondence address as	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
OSTROLENK FABER GERB & SOFFEN 1180 AVENUE OF THE AMERICAS NEW YORK, NY 100368403			8 2004 33	I hereby certify that States Postal Service addressed to the M	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
10/29/2004 MBERHE1 00000117 10649929			DEMART		Samuel H. Weiner, Reg. No. 18,510 (Depositor's name)		
ya , wiewya		<u> </u>	TAUL	Na 1 H		(Signature)	
02 FC:1504 03 FC:8001	300.00 OP 30.00 OP			0048500 36	October 26, 2004 (Date)		
		FIDET MANGED DE				CONTRACTOR OF THE PROPERTY OF	
APPLICATION NO.	FILING DATE	FIRST NAMED I			ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/649,929 08/26/2003 Srikant Sridevan IR-1760 6112 TITLE OF INVENTION: BIDIRECTIONAL SHALLOW TRENCH SUPERJUNCTION DEVICE WITH RESURF REGION							
APPLN. TYPE	SMALL ENTITY	ISSUE FI	ΞE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	*1370 # 1370		\$300	- \$1630 - #1 <i>67</i> 0	12/29/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
WEISS, HOWARD		2814		257-492000			
CFR 1.363). Change of correspondence address (or Change of Correspon Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cus Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
INTERNATIONAL RECTIFIER CORPORATION EL SEGUNDO, CALIFORNIA							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🗖 Individual 🗣 orporation or other private group entity							
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							
Issue Fee Publication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies 10 - \$30.00			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to				
			Deposit Accor	unt Number	(enclose an extra	copy of this form).	
a. Applicant claims Sl	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.			ALL ENTITY status. See 37 (
The Director of the USPTO NOTE: The Issue Fee and Pinterest as shown by the reco	is requested to apply the Issu ublication Fee (if required) vords of the United States Pate	ue Fee and Publicat will not be accepted ent and Trademark	tion Fee (if any I from anyone Office.	or to re-apply any previous other than the applicant; a re-	sly paid issue fee to the applic gistered attorney or agent; or	ation identified above. the assignee or other party in	
Authorized Signature County Horiz			Date October 26, 2004				
Typed or printed name Samuel H. Weiner			Registration No. 2, 510				
an application. Confidentiali	ity is governed by 35 U.S.C.	. 122 and 37 CFR	1.14. This colle	ection is estimated to take 1	y the public which is to file (ar 2 minutes to complete, includicomments on the amount of t	no gathering preparing and	

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.